A

CLAIMS ONLY

Application Number	Filing Date
10/685,469	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2		1					52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10		1					60						
11							61						
12							62						
13							63						
14							64						
15	1						65						
16							66						
17		1					67						
18							68						
~~19~~							69						
20		1					70						
21							71						
22							72						
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41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	2						Total Indep						
Total Depend	17						Total Depend						
Total Claims	19						Total Claims						